

**Speech-Language Pathology and Audiology Board**

1422 HOWE AVENUE, SUITE 3, SACRAMENTO, CA 95825
TELEPHONE: (916) 263-2666/ FAX: (916) 263-2668
www.slpab.ca.gov



**STATE OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
SPEECH-LANGUAGE PATHOLOGY AND AUDIOLOGY BOARD
Department of Consumer Affairs
Medical Board of California
1424 Howe Avenue
Greg Gorges Conference Room "F"
Sacramento, CA 95825**

**AUDIOLOGY PRACTICE COMMITTEE
September 23, 2004
MEETING MINUTES**

Committee Members Present

Rebecca Bingea, M.A., Chairperson
Marcia Raggio, Ph.D.
Alison Grimes, Au.D.

Staff Present

Annemarie Del Mugnaio, Executive Officer
Candace Raney, Staff Analyst
Lori Pinson, Staff Analyst
Albert Balingit, Legal Counsel

Board Members Present

James Till, Ph.D.
Sherry Washington, M.A.

Guests Present

Gail Ternes, California Academy of Audiology
Kathy Matonak, California Academy of Audiology
Robert Powell, California Speech-Language-Hearing Association
V. David Banda, Department of Health Services Children's Medical Services Branch
Hallie Morrow, Department of Health Services Children's Medical Services Branch
Jennifer Sherwood, Department of Health Services Children's Medical Services Branch

I. Call to Order

Chairperson Bingea called the meeting to order at 2:36 p.m.

II. Introductions

Those present introduced themselves.

Ms. Bingea asked if anyone in attendance objected to addressing the agenda discussion out of order to accommodate the schedules of the guest speakers present. There being no objection, the Committee proceeded with the discussion under agenda item IV.

IV. Discussion with Representatives From the California Children Services Newborn Hearing Screening Program Regarding Infant Audiologic Assessment Guidelines and Mandatory Referral Laws for Early Start Program Benefits

Representatives from the Department of Health Services, Children's Medical Services (CMS) Branch introduced themselves to the Committee. The following were in attendance: V. David Banda, Chief, Program Development Unit; Hallie Morrow, M.D., Medical Consultant; and Jennifer Sherwood, M.A., Consulting Audiologist.

Mr. Banda addressed the Committee regarding the letter of July 14, 2004 to the Board from the Acting Chief of the Children's Medical Services Branch, Marion Dalsey, M.D. Mr. Banda summarized points from the letter, wherein CMS notified the Board of audiology practice issues that may be adversely impacting the quality of audiological care provided under the California Children Services (CCS) Newborn Hearing Screening Program (NHSP). Specifically, there was concern that some infants referred for diagnostic evaluation from the NHSP to CCS-approved audiology facilities receive incomplete audiologic assessments, such as click auditory brainstem response (ABR) only. Mr. Banda reported that CMS has taken steps to positively influence the standard of care provided by paneled audiology providers at the approved facilities. He stated that CMS has developed and disseminated infant assessment guidelines, updated and revised the CCS audiology facility standards, enforced compliance with new and more rigorous facility standards as of July 2004 at all Level 3 facilities (facilities approved to serve children 0-21 months of age), and implemented a training program funded by a federal grant to educate audiologists on appropriate infant hearing assessment.

Mr. Banda stated that his agency is continually balancing issues related to adequate assessment and the need to refine provider qualifications, as there are currently too few pediatric audiologists statewide who are capable of providing services to infants identified through the screening program.

Mr. Banda reported that another issue raised in the letter to the Board is that there is a general lack of awareness among audiology providers regarding the statutory obligation to refer infants with hearing loss to the California Early Start Program. He stated that referrals to Early Start are often compromised by delayed or incomplete diagnosis, resulting in delayed referrals, denial of eligibility, or delayed intervention. He further stated that follow-up interviews with families of children identified with hearing loss through the NHSP suggest that audiologists are not adequately communicating with families regarding the diagnosis of hearing loss or the referral to services provided by Early Start. He stated that, in an effort to simplify the referral to Early Start, a toll-free single-point referral telephone line was established via the California Department of Education, Deaf and Hard of Hearing Unit.

Ms. Del Mugnaio requested that Mr. Banda explain the existing mechanisms used by the CMS to ensure that audiology facilities serving CCS-eligible children meet minimum standards.

Mr. Banda reviewed audiologist provider paneling requirements, which specify a general minimum number of years of pediatric clinical experience. He explained the facility approval process, and indicated that it is a document review, as opposed to an on-site evaluation, because limited staffing resources do not permit site visits. He stated that facility revocation is within the authority of the CMS. Mr. Banda noted that on-site technical assistance, consultation, and review by CMS staff are applied when provider performance problems are identified. He suggested that this form of support would be beneficial to all facilities; however, the existing CMS staffing limitations curtail such outreach.

The Committee expressed concern that improper assessment of infant hearing is a consumer protection issue.

Ms. Grimes indicated that, although there are no state regulations regarding standards for infant assessment, there is a document published by the American Academy of Audiology, the "Pediatric Amplification Protocol" (October 2003), that clearly states that appropriate amplification of infants must be based on appropriate assessment.

Ms. Del Mugnaio stated that enforcing suggested guidelines or protocols is problematic, as the standards do not carry the force of law. She stated that statutory changes should be considered by CMS, and that the Board could assist with technical language and follow-up regulations.

The Committee suggested that the CMS branch consider the development of more detailed paneling standards and also suggested that a separate pediatric audiology certificate may be necessary in California.

Ms. Washington inquired about the mechanism that is used by CMS to inform its providers that their procedures are not in accordance with the stated guidelines, and asked whether the NHSP Hearing Coordination Centers could serve to disseminate information to providers.

Ms. Raggio noted that the announcement of the CMS-sponsored training was delayed and that the length of the training (three full days) may pose a problem for practitioners who cannot be away from their employment setting for this extended period of time. She suggested that future training programs be announced well in advance of the scheduled dates.

A discussion ensued regarding federal referral mandates for the Individuals with Disabilities Education Act, Part C/Early Start Program, and that referrals must be made within two working days.

Ms. Bingea suggested that referral requirements and NHSP information be consolidated into a provider education packet.

Ms. Del Mugnaio suggested that the Board assist with educating licensed audiologists about the NHSP and the federal referral mandates by posting CMS information on its website and by including relevant information in its mailings to its licensees. She also stated that she would provide CMS with an electronic mailing list of licensees in the state for future use.

Ms. Del Mugnaio explained that the Board could assist CMS with enforcement issues, in that the Board can provide the agency with information relative to licensee discipline. However, she stated that CMS might wish to review the enforcement and/or disciplinary authority of the Department of Health Services to determine if such authority extends to the provisions of the NHSP and to that of paneled providers or facilities. She suggested that she and representatives from CMS continue the discussions relative to the interaction and exchange of enforcement information at a future administrative meeting.

The representatives from CMS expressed interest in working with the Board on related enforcement matters and agreed that an established mechanism for the exchange of such information is necessary.

Ms. Del Mugnaio stated that, as a first step, the Board could provide the CMS with a quarterly report listing licensees who have been subject to discipline, as the information is public.

III. Legislation

A. SB 1158–Hearing Aid Coverage

Ms. Del Mugnaio reported that, as of September 22, 2004, Governor Schwarzenegger vetoed SB 1158. She distributed the Governor's veto letter to the Committee.

B. Other Legislation of Interest to the Committee

No other legislation was discussed.

There being no further discussion, Chairperson Bingea adjourned the meeting at 4:25 p.m.

Annemarie Del Mugnaio, Executive Officer